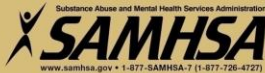


## Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover



## Transforming Your Staff into Integration Champions

**SAMHSA PBHCI National Grantee Meeting**  
**June 4- 7, 2017 • Austin, TX**



## Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), the Health Resources and Services Administration (HRSA), or the U.S. Department of Health and Human Services (HHS).



## Dean Visk MSN, RN



Dean Visk is the Director of Nursing at Greater Cincinnati Behavioral Health, he has earned his Bachelor of Science in Nursing from California University of Pennsylvania and his Master of Science in Nursing from Xavier University. Dean has experience in both the out patient and the inpatient settings. Dean received inpatient experience at the Cleveland Clinic where he served as the Director of Behavioral Health. He has received numerous awards for excellence in nursing including the Interact for Change Nursing Excellence Award, Xavier University Nursing Excellence Award in Innovation for his Capstone Project, and was nominated Safety Champion at the Cleveland Clinic. Dean has been involved with integrated primary and behavioral health care for six years. **Contact Information:** [dvisk@gcbhs.com](mailto:dvisk@gcbhs.com)



# The Behavioral Health Nurse

- **Health Indicator Collection**
- **Medication reconciliation and assisting with patient medication refills**
- **Administration of Long Acting Injections**
- **Wellness Education**
- **Medication self monitoring training**



# Our Challenges Toward Integration

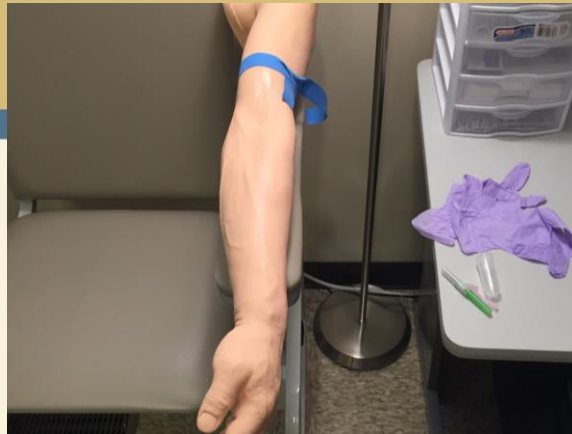
- **Training needs**
- **Hiring and Retention**
- **Believing in Integration**



# Training Needs

## Resources for Training

1. In House
2. Community
3. On Going Support for Nurse Practice



### Phlebotomy Practice Arm

This tool was used to help our behavioral health nurse refresh and renew phlebotomy skills. We have also secured a contract with a lab service that provides a technician to draw blood and obtain specimens.



## Partnering with Community Nursing Schools for Staff Training



## Keeping Up with the Latest Evidence

**LIT REVIEW.NET**

**Nursing Literature Review**

**A Family's Glimpse on Resuscitation while in the Emergency Department**

**Introduction**  
This literature review was created in order to examine the topic of a family's glimpse on resuscitation while in the Emergency Department. The term resuscitation refers to the 'restoration to life or consciousness of one apparently dead, or whose for whom, respirations have ceased' (Balliere's Nursing Dictionary, 2005 p342). The family members refer to either the significant other or relationship with whom the patient has shared a relationship.

**Nurses' Perspective**  
The presence of the family during resuscitation has become a controversial debate among medical and nursing staff inside the emergency department. Even though there has been a lot of studies that have examined the feedback of the staff about this topic, the feeling of welcoming policies that are standard and written is somewhat evident. This review examines the perspective of the staff regarding family resuscitation, focusing on the psychological issues involved.

**Patients' Perspective**  
This theme also examines the effects on the patients psychologically regarding the presence of their family during resuscitation inside the emergency department. As of this point, there has been not enough studies completed regarding the perspective of the patient on having their loved ones present to witness the resuscitation since there are some patients who do not survive the treatment.

**Family's Perspective**  
This theme focuses on the views and effects on the family members on their presence inside the resuscitation room. A quantitative study which was completed by Howard and Phillips (2000) in Shining Meadows Hospital has recorded the impact of allowing 10 family members inside the room. The results have shown that 72% person of the family members wished that they could have been there during the attempt.

Balliere (2005). Nurses' Dictionary for nurses and health care workers. (24th ed.). London: Elsevier Ltd.  
Howard, P., Phillips, M. (2000). The presence of family in a cardiopulmonary resuscitation. Shining meadows hospital's perspective. Journal of Emergency Nursing 3.4, 300-303.



# Hiring and Retention

## Selection Process

1. Experience with primary care and behavioral health
2. Supporting and developing integrated care practice
3. Developing our own



# Believing in Integration

1. Confidence and Competence
2. Celebrate the Successes
3. Share the Evidence
4. One step at a time, learn from challenges



# Role of the Integrated Care Nurse

- Assisting the primary care provider in providing true integrated nursing care
- Providing both primary care and behavioral health care
- Integrated wellness education
- Integrated team huddles
- Treatment team
- Triage in between appointments
- Collaboration medium between providers
- Empowering healthcare change in the population served



# Integrated Education



# Integrated Education

## Integrated Care Nurse Education

- Nutrition
- Cholesterol and Heart Health
- Diabetes
- Medication Adherence and Self Monitoring Training
- Tobacco Reduction



## GCB Integrated Care Nurses





## Integrate Care Team Huddle



## Integrated Care Multidisciplinary Treatment Team



## Clinical Improvements Data

- Monitoring and tracking trends by gender, race/ethnicity, sexual identity.
- Adapting wellness initiatives to meet the needs of the patient population.
- 50% Female
- 50% Male
- 87.7% White
- 8.5% Multi-racial
- 1.5% American Indian
- .8% Asian
- .8% Black
- .8% Hispanic Latino (Central American)



## Clinical Improvements Data

- Age Range 20-76 (43.55)
- Sexual Identity
- 87.7% Heterosexual
- 4.6% Bi-sexual
- 5.5% "don't know"
- 2.3% Gay



## Clinical Improvements Data

Health Indicator	At Risk at Baseline	Outcome Improved
Systolic BP	40.2%	13.4%
Diastolic BP	31.7%	7.3%
Combined BP	46.3%	14.6%
BMI	82.9%	39.0%
Waist Circum	70.4%	45.7%
Breath CO	59.7%	37.7%
HDL	50%	60%
LDL	22.2%	44.4%
Triglyceride	47.6%	28.6%

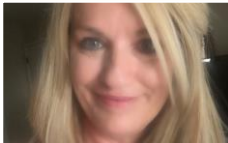
## Referral for Specialty Healthcare Service

- Pharmacy
- Vaccination
- Laboratory Service
- Physical Rehabilitation
- Gastroenterology
- Neurology
- Cardiology
- Urology
- Rheumatology
- Dermatology
- Orthopedic Specialist
- Pain Management
- Mammogram
- Dental

## About the Presenters



**Christine Wells, PhD, MBA** has 25 years experience in community mental health and health care management. She lead a team in the development of a fully integrated care clinic from the ground up including wellness services aimed at reducing health disparities. Contact Information: [cwells@assuranceaz.com](mailto:cwells@assuranceaz.com)



**Joddi Jacobsen, RSS** was part of a team who developed a comprehensive wellness program for individuals with serious mental illness. She serves as the Director of Individual and Family Affairs at an integrated care center where she supervises 20 peer support specialist. She has a degree in Psychology and is pursuing a Masters in Social Work.



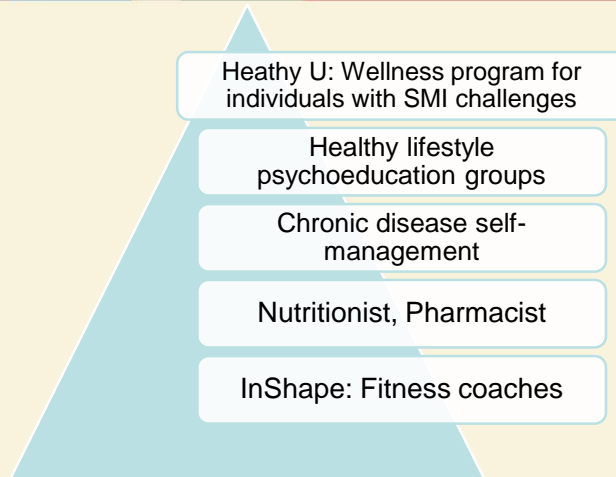
**Suze Cucci, CPHQ** created a population health program for an integrated care clinic working with the clinical teams to improve health outcomes. She has experience providing behavioral health services and in quality management. She is pursuing a masters degree in health care policy and law.



## Assurance Health and Wellness Integrated Care Team Model



# Wellness Services



# Role of Peer Support Specialists



# WHY PEERS?

## LIVED EXPERIENCE

HOPE

TRUST

ROLE  
MODELING

## PEER ROLE IN HEALTH AND WELLNESS



Increased Self-efficacy



Self-Management Skills



Person Centered Goals

# ROLE OF PEER SUPERVISOR

Quality supervisions

Understand unique peer role

Advocate for staff

Understand and promote recovery

Promote professionally and personally



# RECOVERY CULTURE



# Training

## Evidence based practices

- WHAM
- TIC
- MI
- Tobacco Cessation (Dimensions)

## Health and Wellness

- Info on chronic disease
- Healthy behavior activation



# Evolution

- **How the role of peers has evolved:**

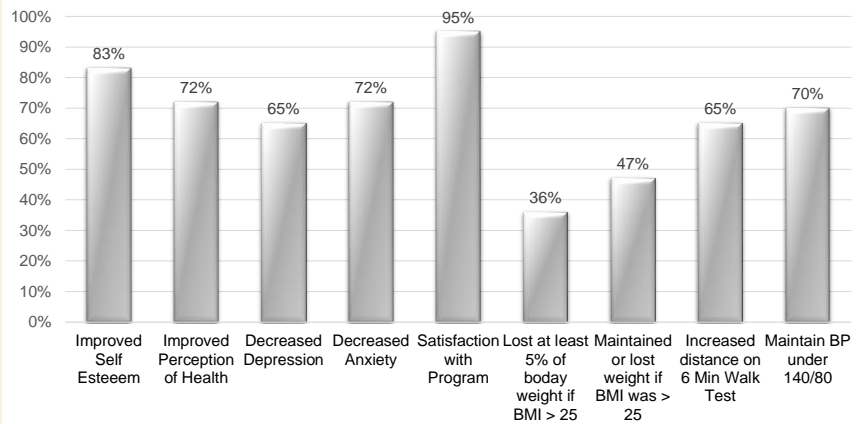
- *HCT Navigators*
- *Health and Wellness Coach*
- *Employment*
- *Housing*
- *Hospital Navigator*





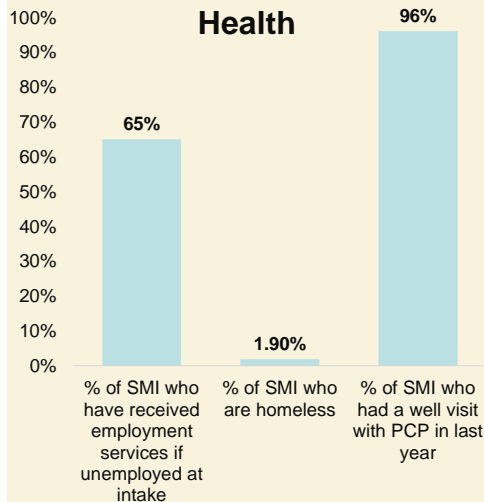
## Outcomes We are Proud Of!

Outcome Measure Healthy U

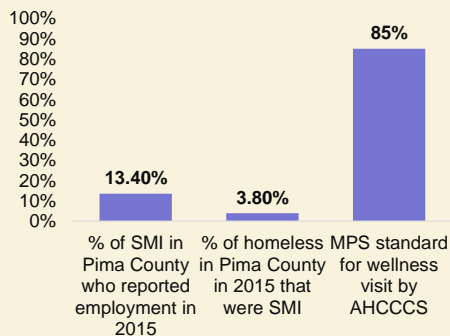


## Wellness Programming and Beyond

Social Determinants of Health

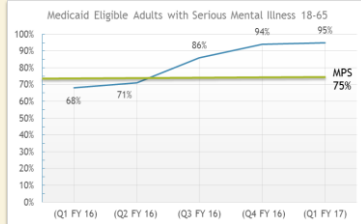


Pima County Data for Comparison

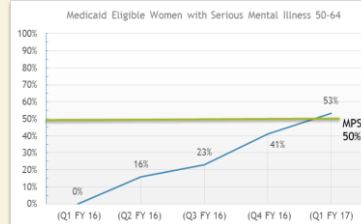


## Preventative Care Outcomes

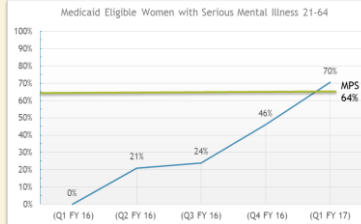
### Adult Access to Care



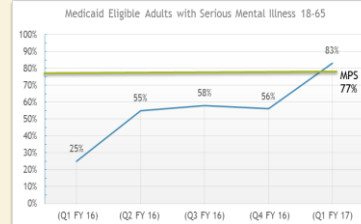
### Breast Cancer Screenings



### Cervical Cancer Screenings



### HbA1c Testing for Diabetes



## Members Voice

**Why having a peer driven wellness program helped me obtain my goals...**



This program is very positive and the people who teach us are where we're from and can empathize with me. They are what I am trying to become.

This is a wonderful program and the instructors here get it and they get me

# QUESTIONS?

